1. Incident Name	2. Date Prepared	3. Time Completed		BRIEF LOG					
			ICS 21	4B – NDOW					
4. Unit Name/Designators	5. Unit Leader		6. Daily Operational Period						
	Name: Position:		DATE From:	TIME					
			To:						
7. Personnel Roster Assigned									
Name	Affiliation								
	ICS Pos								
	8. Operational	Period Debrief	<u> </u>						
General Remarks / Accomplishments:									
ADDITIONAL/SUPPORTING DOCUMENTATION: Response Manager Photographs Video Logbook Other:									
Health & Safety Issues / Problem Areas:									
New Operational Paried Requirements (Add	tional Raduation in Resource	as) (Tastias) Changes).							
Next Operational Period Requirements (Additional-Reduction in Resources) (Tactical Changes):									

1. Incident Name  Preparer Name:		2. Date Prepared	3. Time Completed		UNIT DEBRIEF LOG							
		Position:			ICS 214B – NDOW							
9. Equipment Assigned												
Support Vehicle Inventory:												
Vehicle Type Vehi		e ID No.	Agency	Start Mil	eage	End Mileage	Initials					
Support Equipment Inve	ntory:		<u>l</u>		<u>_</u>							
Equipment Type			Agency Start T		īme	End Time	Initials					
Vehicle/Equipment Unus	sed:											
10. Prepared By (signature):												

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